

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05537

FILED
Feb 18, 2009
Secretary of State

Entity Name: AMERICAN NATURAL SODA ASH CORP.

Current Principal Place of Business:

15 RIVERSIDE AVENUE
WESTPORT, CT 06880 US

New Principal Place of Business:

Current Mailing Address:

15 RIVERSIDE AVENUE
WESTPORT, CT 06880 US

New Mailing Address:

FEI Number: 06-1073279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, ONDINA
121 ALHAMBRA PLAZA
SUITE 1120
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDREWS, JOHN M
Address: 2 SIMMONS LANE
City-St-Zip: GREENWICH, CT

Title: CFO () Delete
Name: DULLINGER, THOMAS G
Address: 12 AVALON WAY
City-St-Zip: SANDY HOOK, CT 06482

Title: D () Delete
Name: DOUVILLE, CHRISTOPHER
Address: 120 EAGLE ROCK AVE 3RD FLOOR
City-St-Zip: EAST HANOVER, NJ 07936

Title: D () Delete
Name: BREUNIG, WILLIAM L
Address: 1735 MARKET STREET
City-St-Zip: PHILADELPHIA, PA 19103

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BLOOMQUIST, DELYLE W
Address: 120 EAGLE ROCK AVE 3RD FLOOR
City-St-Zip: EAST HANOVER, NJ 07936

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BOYLE, KEVIN R
Address: 1800 WEST OAK COMMONS COURT, SUITE 100
City-St-Zip: MARIETTA, GA 30062

Title: D () Change (X) Addition
Name: BUCKINGHAM III, E. J ESQ
Address: 3333 RICHMOND AVENUE
City-St-Zip: HOUSTON, TX 77098

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS G. DULLINGER

CFO

02/18/2009

Electronic Signature of Signing Officer or Director

_____ Date